Recipient Committee Campaign Statement Cover Page	Type or print in	ink.	Date Stamp		IFORNIA 460
(Government Code Sections 84200-84216.5) SEE INSTRUCTIONS ON REVERSE	Statement covers period January 1, 2015 from	Date of election if applicable: (Month, Day, Year)	City Clerk's (JAN 2 2 2 RECEIV	015	
	through				
○ State Candidate Election Committee ○ Recali (Also Complete Part 8) □ General Purpose Committee ○ Sponsored ○ Small Contributor Committee	mplete Parts 1, 2, 3, and 4. Inimarily Formed Ballot Measure Controlled Sponsored Iso Complete Part 6) Irimarily Formed Candidate/ Ifficeholder Committee Iso Complete Part 7)	2. Type of Statement: ☐ Preelection Statement ☐ Semi-annual Statement ☑ Termination Statement (Also file a Form 410 T	ermination)	Quarterly Stat Special Odd- Supplemental Statement - A	Year Report
3. Committee Information COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Marsha Grilli for Milpitas City Council 2014), NUMBER 368387	Treasuror(s) NAME OF TREASURER Jenifer Lind MAILING ADDRESS 1874 Yosemite Drive			
STREET ADDRESS (NO P.O. BOX)		CITY Milpitas	STATE CA	ZIP CODE 95035	AREA CODE/PHONE 408-386-5514
CITY STATE ZIP CO MILIPITAS CA 95038 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. B		NAME OF ASSISTANT TREASU	RER, IF ANY		
CITY STATE ZIP CO	DE AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADD	RESS	80343	
I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California January 21, 2015 Executed on Date Executed on Date Executed on Date Executed on	a that the foregoing is true and correct. By By	Signature of Treasurer or Assistant Privolling Officeholder, Candidate, State Measure Privolling Officeholder, Candidate, Signature of Controlling Officeholder, Candidate, State Measure Privolling Officeholder, Candidate	Opponent or Responsible Officer of States Measure Proponent	550, Jillian Land	e and complete. I certify
Date	*	Signature of Controlling Officeholder, Candidate, 5	State Measure Proponent	r	EDDO Form 460 / Innuesiasi

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
State of California

Officeholder or Candidate Cont	rolled Committee	6. Pr	imarily Formed Ball	ot Measure	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE Marsha Grilli		NA	ME OF BALLOT MEASURE	1	AND THE RESERVE	4.	and of the state o
OFFICE SOUGHT OR HELD (INCLUDE LOCAL Milpitas City Council	TION AND DISTRICT NUMBER IF APPLICABLE)	BA	LLOT NO. OR LETTER	JURISDICTI	ON		SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AN	ND STREET) CITY STATE ZIP Milpitas CA 95035	lde	entify the controlling of	ficeholder, ca	ndidate, or stat	te measure p	proponent, if any
Related Committees Not Include	ed in this Statement: List any committees	_	ME OF OFFICEHOLDER, CA	NDIDATE, OR PF	ROPONENT		
	introlled by you or are primarily formed to receive	OF	FICE SOUGHT OR HELD			DISTRICT NO. I	F ANY
COMMITTEE NAME	I.D. NUMBER						and the second s
NAME OF TREASURER	CONTROLLED COMMITTEE?		imarily Formed Car				
COMMITTEE ADDRESS STREET ADD	RESS (NO P.O. BOX)	NA	ME OF OFFICEHOLDER OR	CÁNDIDATE	OFFICE SOUG	HT OR HELD	SUPPORT OPPOSE
200	STATE ZIP CODE AREA CODE/PHONE	NA	ME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUG	HT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER	NA	ME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUG	HT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?	NA	ME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUG	HT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADD	PRESS (NO P.O. BOX)		and the second s		1		

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

Type or print in ink. Amounts may be rounded to whole dollars.

SUMMARY PAGE

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

	t covers period nuary 1, 2015	CALIFORNIA 460
through	anuary 21, 2015	3 6 Page of
		1.D. NUMBER 1368387

NAME OF FILER Marsha Grilli for Milpitas City Council 2014 Column A Calendar Year Summary for Candidates Column B Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTALTODATE **General Elections** 1,246,47 1,246.47 7/1 to Date -2.500.00 1/1 through 6/30 -2,500.00 Loans Received Schedule B. Line 3 -1.253.53 -1.253.5320. Contributions SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 Received 0 Nonmonetary Contributions Schedule C. Line 3 21. Expenditures -1.253.53-1.253.53Made **Expenditures Made Expenditure Limit Summary for State** 0 **Candidates** 22. Cumulative Expenditures Made* 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 \$ (If Subject to Voluntary Expenditure Limit) 0 Date of Election Total to Date (mm/dd/yy) **Current Cash Statement** 970.53 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ To calculate Column B. add -1.253.53 amounts in Column A to the 13. Cash Receipts Column A, Line 3 above 283.00 corresponding amounts *Amounts in this section may be different from amounts 14. Miscellaneous Increases to Cash Schedule I, Line 4 from Column B of your last reported in Column B. report. Some amounts in 15. Cash Payments Column A, Line 8 above Column A may be negative figures that should be 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ ___ subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only 17. LOAN GUARANTEES RECEIVED Schedule B. Part 2 \$ __ carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any). 18. Cash Equivalents See instructions on reverse \$ _ FPPC Form 460 (January/05) 19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$

Schedule A Monetary Contributions Received	Amount	e or print in ink. ts may be rounded whole dollars.	Statement cov Januar	rers period y 1, 2015		SCHEDULE FORNIA 460
SEE INSTRUCTIONS ON REVERSE			Janua	ry 21, 2015	Page .	4 of 6
NAME OF FILER Marsha Grilli for Milpitas City Council 2014					1.D. NU 13683	
DATE RECEIVED FULÉ NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	'EAR	PER ELECTION TO DATE (IF REQUIRED)
Marsha Grilli 1/20/15	☑IND □COM □OTH □PTY □SCC	Childcare provider/ preschool	\$1,246.47	\$1,246	.47	
	☐IND ☐COM ☐OTH ☐PTY ☐SCC					
	□IND □COM □OTH □PTY □SCC					
	□IND □COM □OTH □PTY □SCC					
	□IND □COM □OTH □PTY □SCC					
Paladada A Communication of the Communication of th		SUBTOTAL	1,246.47			

Schedule A Summary

	. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.)	\$ 1,246.47
	Amount received this period – unitemized monetary contributions of less than \$100	0
3.	. Total monetary contributions received this period.	 1,246.47

*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC) OTH – Other (e.g., business entity)

PTY – Political Party SCC – Small Contributor Committee

S	ch	ed	u	le	В	-	P	art	1
Lo	a	ns	R	ec	ei	VE	<u> </u>	ł	

** If required.

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDU	JLE	B-	PA	RT	1
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Statement covers period

Loans Received		to whole dollar	s.		Januar	y 1, 2015	FORM	45U
SEE INSTRUCTIONS ON REVERSE					Janua through	ry 21, 2015	Page5	of 6
NAME OF FILER							I.D. NUMBER	
Marsha Grilli for Milpitas City Council 201	4						1368387	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAI OR FORGIVE THIS PERIO	EN CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Marsha Grilli	Childcare provider/pre- school	2,500	0	1,253.53	3 \$ 1,246.47	O RATE	\$12,500 \$8/4/14	CALENDAR YEAR \$ PER ELECTION**
TIMIND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
Marsha Grilli	Childcare provider/pre- school	\$_2,500.00	\$	□ PAID \$ FORGIVEN 1,246.47	0 7 n/a		\$12,500 \$8/4/14	CALENDAR YEAR \$ PER ELECTION **
ND □ COM □ OTH □ PTY □ SCC				E BAID	DATE DUE		DATE INCURRED	CALENDARYEAR
[†] □ IND □ COM □ OTH □ PTY □ SCC		\$	\$	PAID \$ FORGIVEN \$	\$DATE DUE	% %	\$DATE INCURRED	\$ PER ELECTION **
		SUBTOTALS \$	0 9	\$ 2,500.0	00 \$	\$ 0	1	
Schedule B Summary 1. Loans received this period				\$	0	(Enter (e) on Schedule E, Line 3)		<u>erg committed all additions and a</u>
(Total Column (b) plus unitemized loans 2. Loans paid or forgiven this period (Total Column (c) plus loans under \$100 (Include loans paid by a third party that	s of less than \$100.) paid or forgiven.)				2,500.00	- C	Contributor Codes ND – Individual COM – Recipient Co (other than I OTH – Other (e.g., ITY – Political Party	ommittee PTY or SCC) business entity)
 Net change this period. (Subtract Line Enter the net here and on the Summary 				NET \$ _	-2,500.00 (May be a negative number)		CC – Small Contrib	
*Amounts forgiven or paid by another party also r)						

Schedule Viiscelland	I eous Increases to Cash	Type or print in ink. Amounts may be rounded to whole dollars.	Statement covers period January 1, 2015 from January 21, 2015	california 460
SEE INSTRUCTION	NS ON REVERSE		through	Page 💪 of 💪
NAME OF FILER				I.D. NUMBER
Marsna Griii	li for Milpitas City Council 2014			1368387
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DE	SCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
1/20/15	City of Milpitas 455 E. Calaveras Blvd. Milpitas, CA 95035	Candidate state	ement 2014 re-imbursement	\$283.00
WALESCONE CONTRACTOR				
			3_ 3- 10 to	
Attach addi	itional information on appropriately labeled continuation sheet	s.	SUBTOTAL	. \$ 283.00
1. Itemized ir	Summary ncreases to cash this period.		•	<u>o</u>
	d increases to cash of under \$100 this period		\$	
4. Total misc	interest received this period on loans made to others ellaneous increases to cash this period. (Add Lines 1 Page. Line 14.)		TOTAL \$283.00	_)

Recipient Committe	00						COVER PAGE
Campaign Stateme			Type or print in	ink.	Date Stamp	C/	ALIFORNIA 460
Cover Page	;11L				City Clerk's		FORM 46U
Government Code Sections 8	34200-84216 5)				LAIRA CIGIK 9	VIIIV	1 9
(Doronniant Dodo Dodono C	1200 0 1210.0)		Statement covers period	Date of election if applicable:	JAN 0 6	2015 Pa	ge of
		fr	October 19,2014	(Month, Day, Year)			For Official Use Only
		"		November 4 0044	RECE	VED	
SEE INSTRUCTIONS ON REVERS	SE	th	rough	November 4, 2014			
1. Type of Recipient C	ommittee: All Committe	ees – Compl	ete Parts 1, 2, 3, and 4.	2. Type of Statement:			The state of the s
Officeholder, Candidate		Prima	arily Formed Ballot Measure	☐ Preelection Statement	1	Quarterly S	statement
	ection Committee		nittee ontrolled	Semi-annual Statemen	t į	Special Od	ld-Year Report
(Also Complete Part 5)		_	ponsored	Termination Statement (Also file a Form 410 T	ermination)		ntal Preelection - Attach Form 495
General Purpose Comr	nittee	(Also C	omplete Part 6)	Amendment (Explain b	•	Statement	· Attach Form 495
O Sponsored	illiacc		arily Formed Candidate/	(2.4			
Small Contributor Co			eholder Committee complete Part 7)				
O Political Party/Centr	al Committee						
3. Committee Informat	ion	1.D. NO 136	JMBER 8387	Treasurer(s)			
COMMITTEE NAME (OR CAN				NAME OF TREASURER			
Marsha Grilli for Milp	itas City Council 2014	4		Jenifer Lind			
				MAILING ADDRESS			
OTHERT ADDRESS (NO. 20	7.000	4	<u> </u>	1874 Yosemite Drive			
STREET ADDRESS (NO P.O.	BOX)			Milpitas	STATE CA	ZIP CODE 95035	area code/phone 408-386-5514
CITY	STATE	ZIP CODE	AREA CODE/PHONE	NAME OF ASSISTANT TREASU		30000	700-000-0014
Milpitas	CA	95035	408-205-4769	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
MAILING ADDRESS (IF DIFFE	ERENT) NO. AND STREET O	R P.O. BOX		MAILING ADDRESS			
O.T.Y							
CITY	STATE	ZIP CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL AD	DDRESS	**************************************		OPTIONAL: FAX / E-MAIL ADD	RESS		<u></u>
. Verification							
I have used all reasonable d	liligence in preparing and re ler the laws of the State of C	eviewing this	statement and to the best of my known the foregoing is true and correct.	owledge the information contained he	erein and in the attache	d schedules is t	rue and complete. I certify
	lanuary 1, 2015	Jamomia are	at the foregoing is the different		.1		
Executed on	Date,	_	By	Signature of Treasurer or Assistant	Treasurer		
Evacuted as	lanuary (, 2015			h 15 20/1			
Executed on	Date		By Signature of Co	ntrolling Officeholder, Candidate, State Measure Pro	oponent or Responsible Officer	of Sponsor	
Executed on			Ву				
	Date		•	Signature of Controlling Officeholder, Candidate, S	State Measure Proponent		
Executed on	Date	···	Ву	Signature of Controlling Officeholder, Candidate, S	State Measure Proponent		
				=	- · · · · · · · · · · · · · · · · · · ·		EUGP Enum 400 / Laminaut - 40 Pt

	COVER	R PAGE	PART 2
CALI	FORNI	A A	20
	ORM		برد
	2		9
Page _		of	

NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF BALLOT MEASURE			
Marsha Grilli		· · · · · · · · · · · · · · · · · · ·			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION)	AND DISTRICT NUMBER IF APPLICABLE)	BALLOT NO. OR LETTER	JURISDICTION		SUPPORT
Milpitas City Council		p			OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND ST	REET) CITY STATE ZIP	Identify the controlling of	fficeholder, cand	idate, or state measu	e proponent, if ar
	<u> </u>	NAME OF OFFICEHOLDER, CA	NDIDATE, OR PROF	PONENT	
Related Committees Not Included in not included in this statement that are control contributions or make expenditures on behalf	led by you or are primarily formed to receive	OFFICE SOUGHT OR HELD		DISTRICT N	O. IF ANY
COMMITTEE NAME	I.D. NUMBER	<u> </u>			J
NAME OF TREASURED	CONTROLLED COMMITTEES	7. Primarily Formed Car			
NAME OF TREASURER	CONTROLLED COMMITTEE?	7. Primarily Formed Car officeholder(s) or candidate			
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS	YES NO		(s) for which this o		ormed.
	YES NO	officeholder(s) or candidate	(s) for which this o	committee is primarily fo	rmed.
COMMITTEE ADDRESS STREET ADDRESS	YES NO	officeholder(s) or candidate	CANDIDATE	committee is primarily fo	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS	YES NO	officeholder(s) or candidate	CANDIDATE	committee is primarily for OFFICE SOUGHT OR HEL	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS	YES NO	NAME OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUGHT OR HEL	Support Oppose Support Oppose Oppose
COMMITTEE ADDRESS STREET ADDRESS	YES NO S (NO P.O. BOX) ZIP CODE AREA CODE/PHONE	officeholder(s) or candidate	CANDIDATE CANDIDATE CANDIDATE	committee is primarily for OFFICE SOUGHT OR HEL	Support Oppose
COMMITTEE ADDRESS STREET ADDRESS	YES NO S (NO P.O. BOX) ZIP CODE AREA CODE/PHONE	NAME OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUGHT OR HEL	Support Oppose Support Oppose Support Oppose Support Oppose
COMMITTEE ADDRESS STREET ADDRESS CITY STATE COMMITTEE NAME NAME OF TREASURER	YES NO NO P.O. BOX)	NAME OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUGHT OR HEL	Support Support Oppose Support Oppose Support Oppose Oppose Oppose Oppose
COMMITTEE ADDRESS STREET ADDRESS CITY STATE COMMITTEE NAME NAME OF TREASURER	YES NO NO P.O. BOX)	NAME OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUGHT OR HEL	Support Oppose Support Oppose Support Oppose Support Oppose Support Oppose
COMMITTEE ADDRESS STREET ADDRESS CITY STATE COMMITTEE NAME NAME OF TREASURER	I.D. NUMBER CONTROLLED COMMITTEE? YES NO REAL CODE/PHONE	NAME OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUGHT OR HEL	Support Oppose Support Oppose Support Oppose Support Oppose Support Oppose

Campaign Disclosure Statement Summary Page

Type or print in ink. Amounts may be rounded to whole dollars.

SUMMARY PAGE CALIFORNIA FORM Statement covers period October 19,2014 from _ 3 December 31, 2014 Page _ through _ I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Marsha Grilli for Milpitas City Council 2014 1368387

Contributions Received 1. Monetary Contributions	,	Column A TOTALTHIS PERIOD FROM ATTACHED SCHEDULES) 4,225.00 -10,000.00	\$	Column B CALENDAR YEAR TOTAL TO DATE 17,361.00 2,500.00	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections 1/1 through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS		-5,775.00 0 -5,775.00	\$ \$	19,861.00 0 19,861.00	20. Contributions Received \$ \$ 21. Expenditures Made \$ \$
Expenditures Made 6. Payments Made Schedule E, Line 4 7. Loans Made Schedule H, Line 3 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3 10. Nonmonetary Adjustment Schedule C, Line 3 11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$	50.00 0 50.00 0 50.00	\$ \$	18,890.47 0 18,890.47 0 0 18,890.47	Expenditure Limit Summary for State Candidates 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date (mm/dd/yy)
Current Cash Statement 12. Beginning Cash Balance Previous Summary Page, Line 16 13. Cash Receipts Column A, Line 3 above 14. Miscellaneous Increases to Cash Schedule I, Line 4 15. Cash Payments Column A, Line 8 above 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 If this is a termination statement, Line 16 must be zero.	\$	6,795.53 -5,775.00 	am cor froi rep Co figu sub	calculate Column B, add ounts in Column A to the responding amounts in Column B of your last ort. Some amounts in lumn A may be negative ures that should be otracted from previous iod amounts. If this is	*Amounts in this section may be different from amounts reported in Column B.
17. LOAN GUARANTEES RECEIVED	vanja sišn	0 2,500.00	for car	first report being filed this calendar year, only ry over the amounts m Lines 2, 7, and 9 (if	FPPC Form 460 (January/0 FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-377

Schedule A **Monetary Contributions Received**

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A

	00,120022				
Statement covers period October 19,2014	CALIFORNIA 460				
December 31, 2014	4 9 Page of				

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Marsha Grilli for Milpitas City Council 2014

I.D. NUMBER 1368387

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/25/14	Santa Clara & San Benito Counties Building & Constructions Trades Council 2102 Almaden Rd., Suite 101 San Jose, CA 95125	□IND ☑COM □OTH □PTY □SCC	FPPC# 743618	\$250.00	\$250.00	\$250.0
10/26/14	Talha A. Daimee 3192 Salem Dr. San Jose, CA. 95127-1038	☑IND □COM □OTH □PTY □SCC	Financial Analyst 1Net	\$150.00	\$150.00	\$150.00
10/26/14	Munawwar Ali Daimee 3192 Salem Drive San Jose, CA. 95127-1038	☑IND □COM □OTH □PTY □SCC	Retired	\$50.00	\$100.00	\$100.0
10/30/14	No. Ca. Carpenters Regional Council ID# 972104 265 Hegenberger Road, Suite 200 Oakland, California 94621	□IND COM □OTH □PTY □SCC		\$250.00	\$250.00	\$250.0
11/1/14	Robert F. Cracolice 45820 Vinehill Ter Fremont, CA 94539-6010	☑IND □COM □OTH □PTY □SCC	Insurance Sales Wells Fargo Insurance	\$250.00	\$250.00	\$250.0
			SUBTOTAL	\$ 950.00		
chedule A	A Summary				*Contributor C	Codes

- 1. Amount received this period itemized monetary contributions. 3,950.00 (Include all Schedule A subtotals.)....\$
- 275.00 2. Amount received this period – unitemized monetary contributions of less than \$100\$
- 3. Total monetary contributions received this period. 4,225.00

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Type or print in ink.

SCHEDULE A (CONT.)

Monetary Contributions Received	Amounts may be rounded to whole dollars.	Statement covers period October 19,2014 from	CALIFORNIA 460
		through	9 Page of
NAME OF FILER Marsha Grilli for Milpitas City Council 2014			i.D. NUMBER 1368387
		ALICHET CONTROL OF THE PROPERTY OF THE PROPERT	DED ELECTION

	·					
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/1/14	Laborerss Local Union 270 PAC ID# 901351 555 Capitol Mall, Suite 1425 Sacramento, CA 95814	☐IND ☐COM ☐OTH ☐PTY ☐SCC		\$250.00	\$250.00	\$250.00
11/1/14	California Real Estate PACf FPPC ID# 890106 525 S. Virgil Avenue Los Angeles, CA 90020	☐IND ☐COM ☐OTH ☐PTY ☐SCC		\$250.00	\$250.00	\$250.00
10/24/14	Wilson Management 14428 Big Basin Way, #A Saratoga, CA 95070	□IND □COM ØOTH □PTY □SCC		\$250.00	\$250.00	\$250.00
10/24/14	Marie Cox 6698 Hampton Drive San Jose, CA 95120	☑IND □COM □OTH □PTY □SCC	Retired	\$250.00	\$250.00	\$250.00
10/24/14	Robert Pfeil 2358 Pheasant Run Circle Stockton, CA 95207	☑IND □COM □OTH □PTY □SCC	V. P. Property Acq. RPM Co.	\$250.00	\$250.00	\$250.00
			SUBTOTALS	1,250.00		

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

Schedule A (Continuation Sheet)

Wendy Garibaldi

David Fisher

Ernest Gomez

Tracy, CA 95377

1311 Řivergate Drive

Lodi, CA 95240-0549

Acampo, CA 95220

4599 Windchime Way

2000 W. Brovelli Woods Lane

Type or print in ink.

□отн □ PTY

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PTY □scc SCHEDULE A (CONT.)

\$250.00

\$250.00

\$200.00

Mionetary Contributions Received		1S Received Amounts may be rounded to whole dollars.		Statement cover October from	19,2014	california 460	
				Decemb through	er 31, 2014	Page_	6 of 9
NAME OF FILER Marsha Gri	lli for Milpitas City Council 2014					1.D. NUI 13683	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	/EAR	PER ELECTION TO DATE (IF REQUIRED)
10/24/14	David Wilson 3645 Divisadero Street San Francisco, CA 94123	☑IND □COM □OTH □PTY □SCC	Consultant self employed	\$250.00	\$250	.00	\$250.00
10/24/14	Jean Smith 4208 Chaboya Rd. San Jose, CA 95148	☑IND □COM □OTH	Manufacturer/ Bldg. Supplier Self Employed	\$250.00	\$250	.00	\$250.00

Stucco Supply Co.

RPM Company

Property Management

SUBTOTAL \$

\$250.00

\$250.00

\$200.00

1,200.00

President

RPM Co.

Firefigther

City of Milpitas

*Contributor Codes

10/24/14

10/24/14

11/18/14

IND - Individual COM - Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

\$250.00

\$250.00

\$200.00

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

Monetary Contributions Received		Amounts may to whole o		Statement cov October from	ers period 19,2014	CALIFORNIA 460		
				Decemb through	er 31, 2014	Page	7 9 of	
NAME OF FILER Marsha Gr	illi for Milpitas City Council 2014					I.D. NUME 136838		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)	
12/15/14	ATU Local 265 PAC 841330 1590 La Pradera Drive Campbell, CA 95008	□IND COM □OTH □PTY □SCC		\$250.00	\$250.00 \$100.00		\$250.00	
10/26/14	Mohammad A Nada 460 Capella Way Milpitas, CA 95035	☑IND □COM □OTH □PTY □SCC	Engineer Manager Skyera	\$50.00			\$100.00	
12/22/14	DAWN Democratic Activists for Women Now 25 Cedar Lane San Jose, CA 95127	☐IND ☐COM ☐OTH ☐PTY ☐SCC	FPPC No. 950169	\$250.00	\$250	.00	\$250.00	
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
			SUBTOTAL	\$ 550.00				

*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)
OTH – Other (e.g., business entity)

PTY - Political Party

S	C	h	e	d	u	le	В		P	aı	t	1	
L	O	a	n	S	R	e	e	ive) (1			

** If required.

Type or print in ink.

SCHEDULE B-PART 1

Loans Received	Received to whole dollars. Amounts may be rounded Statement covers period October 19,2014 from		CALIFORN FORM	¹⁴ 460				
SEE INSTRUCTIONS ON REVERSE					December December 1	oer 31, 2014	8 Page	9 of
NAME OF FILER					<u>y</u>		I.D. NUMBER	
Marsha Grilli for Milpitas City Council 20	14						1368387	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAI OR FORGIVE THIS PERIO	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Marsha Grilli	Childcare provider/pre- school	10 500		PAID 10,000 \$FORGIVEN		O%	\$12,500	CALENDAR YEAR 12,500 \$ PER ELECTION**
† IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$	n/a DATE DUE	\$C	8/4/14 DATE INCURRED	\$
		\$	\$	PAID FORGIVEN S	\$	% RATE	\$	\$PER ELECTION **
T IND COM OTH PTY SCC				☐ PAID	DATE DUE		DATE INCURRED	CALENDAR YEAR
				\$FORGIVEN	\$ <u></u>	RATE	\$	\$PER ELECTION**
TO IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
		SUBTOTALS	0 ;	10,00	0 \$ 2,500)	
Schedule B Summary				Φ.	0	(Enter (e) on Schedule E, Line 3)		
 Loans received this period		•••••	•••••	Ф		[†	Contributor Codes	
 Loans paid or forgiven this period (Total Column (c) plus loans under \$100 (Include loans paid by a third party that 	\$	10,000.00	IND – Individual COM – Recipient Committee (other than PTY or SCC) OTH – Other (e.g., business entity) PTY – Political Party					
 Net change this period. (Subtract Line Enter the net here and on the Summar 		••••••••		NET \$	-10,000.00 (May be a negative number)		SCC – Small Contrib	
*Amounts forgiven or paid by another party also	must be reported on Schedule A.	1						

Schedule E Payments Made

Type or print in ink. Amounts may be rounded to whole dollars

	SCHEDULEE
Statement covers period October 19,2014 from	CALIFORNIA 460
through December 31, 2014	9 9 Page of
	I.D. NUMBER 1368387

ay monto mado	to whole	uonars.		fr	om		·····	
SEE INSTRUCTIONS ON REVERSE				th	December	r 31, 201 [∠]	Page	9 9 of
NAME OF FILER Marsha Grilli for Milpitas City Council 2014				<u> </u>			1.D. NUME 1368387	
CODES: If one of the following codes accurately describes CMP campaign paraphernalia/misc. CNS campaign consultants	MBR member co	nmunications	;	RA RFI	D radio airtime and D returned contrib	d production coutions	osts	
CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings		ulating s survey rese livery and n	arch nessenger services egal, accounting)	SA TEI TR TR: S TSI VO	t.v. or cable airti candidate travel staff/spouse travel transfer between voter registration	me and product, lodging, and revel, lodging, and revel, lodging, and committees of	meals nd meals of the same	e candidate/sponsor mail)
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPT	ION OF PAYMENT			AMOUNT PAID
				-				
					And the second	and the second s		A () () () () () () () () () (
* Payments that are contributions or independent expenditures r	nust also be sum	narized on	Schedule D.			SUB	STOTAL \$	0
Schedule E Summary								0
1. Itemized payments made this period. (Include all Schedule								50.00
2. Unitemized payments made this period of under \$100								0
3. Total interest paid this period on loans. (Enter amount from	Schedule B, Par	: 1, Columi	n (e).)				\$	FO 00

Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in	ink.	Date Stamp		CALIFORNIA 46)	
SEE INSTRUCTIONS ON REVERSE	Statement covers period October 1, 2014 fromOctober 18, 2014 through	Date of election if applicable: (Month, Day, Year) November 4, 2014	OCT 2 2 2014	ı	For Official Use Only	
 ◯ State Candidate Election Committee ◯ Recall (Also Complete Part 5) ◯ General Purpose Committee ◯ Sponsored ◯ Small Contributor Committee 	omplete Parts 1, 2, 3, and 4. Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	2. Type of Statement: ✓ Preelection Statement ☐ Semi-annual Statement ☐ Termination Statement (Also file a Form 410 To ☐ Amendment (Explain b	ermination)	☐ Supplementa	atement -Year Report al Preelection Attach Form 495	
3. Committee Information	D. NUMBER 1368387	Treasurer(s)		tigenstein sam vinner er och en men	and which the first first first first first separate and consider the second section of the second section (se	
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Marsha Grilli for Milpitas City Council 2014		NAME OF TREASURER Jenifer Lind MAILING ADDRESS 1874 YOSEMITE Drive				
STREET ADDRESS (NO P.O. BOX)		сітү Milpitas	STATE CA	ZIP CODE 95035	AREA CODE/PHONE 408-386-5514	
CITY STATE ZIP C Milpitas CA 9503		NAME OF ASSISTANT TREASU	RER, IF ANY			
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. I	вох	MAILING ADDRESS		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
CITY STATE ZIP C	ODE AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE	
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDR	RESS			
1. Verification I have used all reasonable diligence in preparing and reviewin under penalty of perjury under the laws of the State of Californ October 18, 2014 Executed on Date Executed on Date Executed on Date	ia that the foregoing is true and correct. By By	owledge the information contained he Signature of Treasurer or Assistant Introlling Officeholder, Candidate, State Measure Pro	Preasurer Preasu	<u> </u>	ue and complete. I certify	
Executed on	Ву	Signature of Controlling Officeholder, Candidate, S	tate Measure Proponent		EDDO Farms 400 / January 105	

Officeholder or Candidate Controlled Committee			6. Primarily Formed Ballot Measure Committee				
NAME OF OFFICEHOLDER OR CANDIDATE Marsha Grilli			NAME OF BALLOT MEASURE				
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT Milpitas City Council	NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTIO	NC		SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY	STATE ZIP		Identify the controlling of	ficeholder, car	ndidate, or stat	e measure p	roponent, if any
Related Committees Not Included in this State not included in this statement that are controlled by you or contributions or make expenditures on behalf of your candidate.	are primarily formed to receive		NAME OF OFFICEHOLDER, CAI	NDIDATE, OR PR		DISTRICT NO. IF	ANY
COMMITTEE NAME	D. NUMBER						
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Can officeholder(s) or candidate(s				
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	HT OR HELD	SUPPORT OPPOSE
CITY STATE ZIP COD			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	HT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	D. NUMBER		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	HT OR HELD	SUPPORT OPPOSE
	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	HT OR HELD	SUPPORT OPPOSE
CITY STATE ZIP COD			Atta	ch continuatio	on sheets if ne	cessary	

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

Type or print in ink.

Amounts may be rounded to whole dollars.

| Statement covers period | October 1, 2014 | CALIFORNIA 460 | FORM | FO

NAME OF FILER Marsha Grilli for Milpitas City Council 2014 Contributions Received Column A Column B Calendar Year Summary for Candidates TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTALTODATE **General Elections** 1. Monetary Contributions Schedule A, Line 3 \$ 2,174.00 13,136,00 2. Loans Received Schedule B. Line 3 \$12,500,00 1/1 through 6/30 7/1 to Date 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ 2,174.00 25.636.00 20. Contributions 4. Nonmonetary Contributions Schedule C, Line 3 0 Received 0 21. Expenditures 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 \$ 2,174.00 25,636,00 Made **Expenditures Made Expenditure Limit Summary for State** 6. Payments Made Schedule E, Line 4 \$ 4.562.52 18.840.47 Candidates 7. Loans Made Schedule H, Line 3 0 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 \$ 4,562,52 18,840.47 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) 9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3 0 Date of Election Total to Date 0 (mm/dd/yy) 11. TOTAL EXPENDITURES MADEAdd Lines 8 + 9 + 10 4.562.52 18,840.47 **Current Cash Statement** 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ 9,184.05 To calculate Column B, add 13. Cash Receipts Column A, Line 3 above 2,174.00 amounts in Column A to the 14. Miscellaneous Increases to Cash Schedule I, Line 4 corresponding amounts *Amounts in this section may be different from amounts from Column B of your last reported in Column B. 15. Cash Payments Column A, Line 8 above 4,562.52 report. Some amounts in Column A may be negative 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ 6.795.53 figures that should be subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed 17. LOAN GUARANTEES RECEIVED Schedule B, Pert 2 \$ _ for this calendar year, only carry over the amounts Cash Equivalents and Outstanding Debts from Lines 2, 7, and 9 (if 18. Cash Equivalents See instructions on reverse \$ any). 19. Outstanding Debts Add Line 2 + Line 9 in Column 8 above 12,500,00 FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A Monetary Contributions Received

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A

| CALIFORNIA | 460 | FORM | CALIFORNIA | 460 | FORM | Management | Man

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Marsha Grilli for Milpitas City Council 2014

The second strip in the frequency of the second						
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/2/14	Cheryl Jordan 20150 Mendelsohn Lane Saratoga, CA 95070	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Educator MUSD	\$100.00	\$100.00	\$100.00
10/7/14	Sheet Metal Workers' Int'l Association Local 104 PAC ID # 850381 2610 Crow Canyon Rd., Ste. 300 San Ramon, California 94583-1547	□IND □COM □OTH □PTY □SCC		\$250.00	\$250.00	\$250.00
10/10/14	Timothy T Nguyen 1738 44 Ave San Francisco, CA 94122	☑IND □COM □OTH □PTY □SCC	Manager Pandara	\$250.00	\$250.00	\$250.00
10/11/14	Glenn R Brown 1303 9th St. Alameda, CA 94501-3953	☑IND □COM □OTH □PTY □SCC	Civil Engineer self employed	\$250.00	\$250.00	\$250.00
10/11/14	Urban Arena 3195 Red Hill Avenue -Loft F Costa Mesa, CA 92626	□IND □COM ØOTH □PTY □SCC		\$250.00	\$250.00	\$250.00
			SUBTOTAL \$	1,100.00		

Schedule A Summary

- 1. Amount received this period itemized monetary contributions.
 (Include all Schedule A subtotals.) \$

 2. Amount received this period unitemized monetary contributions of less than \$100 \$

*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (January/05)

Type or print in ink.
Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

from_

October 1, 2014

				Octobe	er 18, 2014	Page_	5 8 of		
NAME OF FILER Marsha Grilli for Milpitas City Council 2014						1.D. NUI 13683	1		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR \ (JAN. 1 - DEC	/EAR	PER ELECTION TO DATE (IF REQUIRED)		
10/14/14	NCM Marketing Inc. PO Box 106 Reeders, PA 18352 425 Whitehead Ave, South River, NJ 08882	□IND □COM ØOTH □PTY □SCC		\$250.00	\$250.00		\$250.00		
10/16/14	IBEW Education Fund FPPC ID#1298069 2125 Canoas Garden Ave., Suite 100 San Jose, CA 95125	□IND COM □OTH □PTY □SCC		\$250.00	\$250	.00	\$250.00		
10/17/14	Plumbers, Steamfitters Local 393 PAC ID# 851452 555 Capitol Mall, Suite 1425 Sacramento, CA 95814	□IND COM □OTH □PTY □SCC		\$250.00	\$250	.00	\$250.00		
		□IND □COM □OTH □PTY □SCC	,						
		□IND □COM □OTH □PTY □SCC							
	SUBTOTAL\$ 750.00								

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

S	ch	ed	ule	B-	Part	1
•	~~	20	Da	ani.	~ dl	

** If required.

Type or print in ink. Amounts may be rounded

SCHEDULE B - PA	٩R	T	1
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Statement covers period

Schedule B – Part 1 Loans Received	Amounts may be rounded					vers period er 1, 2014			
CEE INCEDITATIONS ON BEVEROE					Octob	er 18, 2014	Page6	8 of	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER					tilloagii		I.D. NUMBER	01	
Marsha Grilli for Milpitas City Council 201	4						1368387		
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER LD. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAI OR FORGIVE THIS PERIO	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE	
Marsha Grilli	Childcare provider/pre- school			PAID \$ FORGIVEN		O%	\$12,500	CALENDARYEAR 12,500 \$ PERELECTION**	
† por Ind □ com □ oth □ pty □ scc		\$	\$	\$	n/a DATE DUE	\$0	8/4/14 DATE INCURRED	\$	
				PAID FORGIVEN	\$	% RATE	\$	\$PERELECTION **	
† IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$	
[†] □ IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$ PAID \$ FORGIVEN	\$DATE DUE	% RATE	\$ DATE INCURRED	\$PER ELECTION**	
		SUBTOTALS	, 0;	}	0 \$ 12,500	\$		_	
Schedule B Summary 1. Loans received this period				\$	0	(Enter (e) on Schedule E, Line 3)			
(Total Column (b) plus unitemized loans							Contributor Codes		
 Loans paid or forgiven this period	paid or forgiven.)			\$	0	- C	ID – Individual OM – Recipient Co (other than TH – Other (e.g., TY – Political Part	PTY or SCC) business entity)	
3. Net change this period. (Subtract Line Enter the net here and on the Summary				NET \$	(May be a negative number)	s	CC – Small Contri	outor Committee	
*Amounts forgiven or paid by another party also i	must be reported on Schedule A.)							

Schedule E Payments Made

Type or print in ink. Amounts may be rounded

Statement covers period October 1, 2014 from	CALIFORNIA 460					
October 18, 2014	7 8 Page of					
	I.D. NUMBER 1368387					

ayments made	to whole dollars.			from	FORM	
SEE INSTRUCTIONS ON REVERSE				October 18, 2014	7 8 Page of	
NAME OF FILER Marsha Grilli for Milpitas City Council 2014					I.D. NUMBER 1368387	
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings an OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, deli	munications d appearance ses lating survey resear	es	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries t.v. or cable airtime and pro TRC candidate travel, lodging, an staff/spouse travel, lodging,	duction costs id meals and meals es of the same candidate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DES	CRIPTION OF PAYMENT	AMOUNT PAID	
Pacific Printing 1002 South 2nd Street San Jose, CA 95112		CMP	Banners		\$479.59	
Pacific Printing	a naturalizacijam iz nakostić na kontrologijam iz naturalizacijam iz n				- LA - WASHINGTON - CONTROL - CONTRO	

(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
Pacific Printing 1002 South 2nd Street San Jose, CA 95112	СМР	Banners	\$479.59
Pacific Printing 1002 South 2nd Street San Jose, CA 95112	LIT		\$876.53
Milpitas Post Newpapers 59 Marylinn Drive Milpitas, CA 95035		Internet Advertising	\$450.00

Schedule E Summary 4.536.54 1. Itemized payments made this period. (Include all Schedule E subtotals.).....\$ 25.98 2. Unitemized payments made this period of under \$100\$ 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)......\$ 4.562.52

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

1,806.12

Schedule E (Continuation Sheet) Payments Made

CMP campaign paraphernalia/misc.

Type or print in ink.

Amounts may be rounded to whole dollars.

MBR member communications

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

SCHEDULE I	E (CONT.)
------------	-----------

Statement covers period October 1, 2014 from	CALIFORNIA 460
October 18, 2014	8 8 Page of
	I.D. NUMBER 1368387

RAD radio airtime and production costs

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Marsha Grilli for Milpitas City Council 2014

Page ____ of ____

I.D. NUMBER

1368387

CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MTG OFC PET PHO POL POS PRO PRT	meetings and office expen petition circul phone banks polling and s postage, deli professional print ads	ses lating survey reservery and m		RFD returned contributions SAL campaign workers' salarie TEL t.v. or cable airtime and pro- TRC candidate travel, lodging, a TRS staff/spouse travel, lodging TSF transfer between committe VOT voter registration WEB information technology cos	oduction costs nd meals , and meals es of the same ca	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CODE	OR	DESCRIPTION OF PAYMENT	A	MOUNT PAID
Pacific Printing 1002 South 2nd St. San Jose, CA 95112			POS				\$2,267.66
Jenifer Lind 1874 Yosemite Drive Milpitas, CA 95035				Re-imburser	ment for food for volunteers		\$161.90
Pacific Printing 1002 South 2nd St. San Jose, CA 95112	*****		СМР				108.75
Dennis Grilli				Re-imburser and campai	ment for food purchases for walk egning event.	event	\$192.11
* Payments that are contributions or independent expenditures must al	lso be su	mmarized on	Schedule D).	S	UBTOTAL \$	2,730.42

Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in	ı ink.	CALIFORNIA 46) FORM 1 18	
(Covernment Code Coulons C4200 C4210.3)	Statement covers period July 1, 2014 from	Date of election if applicable: (Month, Day, Year)	City Clerk's Offi OCT 2 3 2014	For Official Use Only
SEE INSTRUCTIONS ON REVERSE	throughSept. 30, 2014	November 4, 2014	RECEIVE	
1. Type of Recipient Committee: All Committees -	- Complete Parts 1, 2, 3, and 4.	2. Type of Statement:		
 ✓ Officeholder, Candidate Controlled Committee State Candidate Election Committee Recall (Also Complete Part 5) ✓ General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee 	Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 T Amendment (Explain b The ID# submitted wi	ermination) si selow) th the Milpitas Employ	uarterly Statement pecial Odd-Year Report upplemental Preelection ratement - Attach Form 495 ees Association's
3. Committee Information	I.D. NUMBER 1368387	Treasurer(s)	iki kangangan pangang kali katik katikan kangang pangang pangang bahar anakanda kiti	
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITT Marsha Grilli for Milpitas City Council 2014	EE)	NAME OF TREASURER Jenifer Lind MAILING ADDRESS 1874 Yosemite Drive		
STREET ADDRESS (NO P.O. BOX)		сітү Milpitas		O35 AREA CODE/PHONE 408-386-5514
CITY STATE ZIF	CODE AREA CODE/PHONE	NAME OF ASSISTANT TREASU	RER, IF ANY	
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.	O. BOX	MAILING ADDRESS		
CITY STATE ZIF	CODE AREA CODE/PHONE	CITY	STATE ZIF	CODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADD	RESS	
4. Verification I have used all reasonable diligence in preparing and revie	wing this statement and to the best of my kr	nowledge the information contained he	erein and in the attached sch	edules is true and complete. I certify
under penalty of perjury under the laws of the State of Califo October 22, 2014 Executed on Date October 22, 2014	ornia that the foregoing is true and correct.	Signature of Treasury or Assistant	Treasurer ,	
Executed on	By Signature of C	ontrolling Officeholder, Candidate, State Measure Pr	oponent or Responsible Officer of Spon	sor
Executed on	Ву	Signature of Controlling Officeholder, Candidate, S	State Measure Proponent	
Executed on	Ву	Signature of Controlling Officeholder, Candidate, S	State Measure Proponent	EDDC Farm 400 / I

				COVER PAGE
Recipient Committee	Type or print in	ı înk.	Date Stamp	CALIFORNIA 460
Campaign Statement			Otal Obside A	FORM 40U
Cover Page				
Government Code Sections 84200-84216.5)	Statement covers period	Date of election if applicable:	OCT 0 6 201	A Page 1 of /8
	July 1, 2014	(Month, Day, Year)	001 0 0 201	For Official Use Only
	from	•		
EEE INSTRUCTIONS ON REVERSE	through Sept. 30, 2014	November 4, 2014		
. Type of Recipient Committee: All Committees - C	complete Parts 1, 2, 3, and 4.	2. Type of Statement:		
	Primarily Formed Ballot Measure	Preelection Statement	П	Quarterly Statement
State Candidate Election Committee	Committee	☐ Semí-annual Statement	-	Special Odd-Year Report
	Controlled Sponsored	Termination Statement		Supplemental Preelection
	(Also Complete Part 6)	(Also file a Form 410 To	,	Statement - Attach Form 495
General Purpose Committee	Primarily Formed Candidate/	Amendment (Explain b	elow)	
Small Contributor Committee	Officeholder Committee			
O Political Party/Central Committee	(Also Complete Part 7)			
3. Committee Information	D. NUMBER	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE	1368387	NAME OF TREASURER		
Marsha Grilli for Milpitas City Council 2014		Jenifer Lind		
, ,		MAILING ADDRESS		
		1874 Yosemite Drive		
STREET ADDRESS (NO P.O. BOX)		CITY		P CODE AREA CODE/PHONE
		Milpitas		5035 408-386-5514
CITY STATE ZIP C	ODE AREA CODE/PHONE	NAME OF ASSISTANT TREASU	RER, IF ANY	
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.	BOY	MAILING ADDRESS		
MAILING ADDITESS (IF DITTERN) NO. AND STREET OF T.O.		MINICINO ADDITEO		
CITY STATE ZIP C	ODE AREA CODE/PHONE	CITY	STATE ZI	P CODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDR	RESS	
. Verification				
I have used all reasonable diligence in preparing and reviewir	ng this statement and to the best of my kn	owledge the information contained he	rein and in the attached sch	edules is true and complete. I certify
under penalty of perjury under the laws of the State of Californ	ha that the foregoing is true and correct.	7	10	
October 1, 2014	By	ender ()	ball	
Date October 5,2014	Em	Signature of Treasurer or Assistant.	Areasurer	
Executed on	By Signature of Co	ontrolling Officeholder, Candidate, State Measure Pro	ponent or Responsible Officer of Spor	1907
		71		
Executed onDate	Ву	Signature of Controlling Officeholder, Candidate, S	tate Measure Proponent	
Executed on	Ву	•		
Date		Signature of Controlling Officeholder, Candidate, S	tate Measure Proponent	EDDC Form 460 (January/05)

Officeholder or Candidate Controlled Com	mittee	6.	Primarily Formed Ballot Measure Committee			
NAME OF OFFICEHOLDER OR CANDIDATE Marsha Grilli			NAME OF BALLOT MEASURE			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTI	RICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICT	ON	SUPPORT OPPOSE
Milpitas City Council						
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE ZIP	•	Identify the controlling of	ficeholder, ca	ındidate, or state meas	ure proponent, if any.
			NAME OF OFFICEHOLDER, CA	NDIDATE, OR P	ROPONENT	
Related Committees Not Included in this S not included in this statement that are controlled by yo contributions or make expenditures on behalf of your of	u or are primarily formed to receive		OFFICE SOUGHT OR HELD		DISTRICT	NO. IF ANY
COMMITTEE NAME	I.D. NUMBER					
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Car officeholder(s) or candidate(ididate/Official in the state of the state o	is committee is primarily	formed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O	BOX)		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR H	SUPPORT OPPOSE
CITY STATE ZIF	CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR H.	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR H	ELD SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR H	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O	. BOX)		· · · · · · · · · · · · · · · · · · ·			
CITY STATE ZIF	CODE AREA CODE/PHONE		* Atta	ach continuat	ion sheets if necessary	′

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

Type or print in ink,
Amounts may be rounded
to whole dollars.

NAME OF FILER Marsha Grilli for Milpitas City Council 2014 1368387 Column B Calendar Year Summary for Candidates Column A **Contributions Received** TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTALTODATE General Elections 10.962.00 10.962.00 1. Monetary Contributions Schedule A, Line 3 \$ 1/1 through 6/30 7/1 to Date \$12.500.00 \$12,500.00 23,462,00 23,462,00 20. Contributions 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 Received 21, Expenditures 23,462.00 23.462.00 Made 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 **Expenditures Made Expenditure Limit Summary for State** 14,277.95 Candidates 6. Payments Made Schedule E. Line 4 0 7. Loans Made Schedule H. Line 3 22. Cumulative Expenditures Made* 14.277.95 14,277.95 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date (mm/dd/yy) 10. Nonmonetary Adjustment Schedule C, Line 3 14.277.95 14,277.95 **Current Cash Statement** 0 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ To calculate Column B. add 23,462.00 amounts in Column A to the corresponding amounts *Amounts in this section may be different from amounts 14. Miscellaneous Increases to Cash Schedule I. Line 4 from Column B of your last reported in Column B. 14,277,95 report. Some amounts in Column A may be negative 9.184.05 figures that should be 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if **Cash Equivalents and Outstanding Debts** any). FPPC Form 460 (January/05) 19. Outstanding Debts Add Line 2 + Line 9 in Column B above FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A Monetary Contributions Received

Type or print in ink. Amounts may be rounded to whole dollars. SCHEDULE A

Monetary	Contributions Received		s may be rounded whole dollars.	Statement cov July from	rers period 1, 2014	california 460	
				Sept.	30, 2014	Page .	4 of 18
SEE INSTRUCTIONAME OF FILER	DNS ON REVERSE	<u> </u>				I.D. NU	
	rilli for Milpitas City Council 2014					13683	3
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
8/8/14	Wenjing Zhang 755 Seawood Way San Jose, CA 95120	☑IND □COM □OTH □PTY □SCC	CBO/MUSD	\$200.00	\$200.	00	\$200.00
8/8/14	Debbie Indihar Giordano 1916 Grand Teton Drive Milpitas, CA 95035	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Broker Master Brokers	\$250.00	\$250.	00	\$250.00
8/10/14	Ashley Grilli 440 Dixon Landing Road, F-201 Milpitas, CA 95035	MIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Teacher MUSD	\$250.00	\$250	00	\$250.00
8/16/14	Oona Cadorin 1178 Lassen Ave. Milpitas, CA 95035	MIND COM OTH PTY SCC	Teacher MUSD	\$100.00	\$100	00	\$100.00
8/16/14	Anna Grilli Winston 1117 Pescadero St. Milpitas, CA 9035	MIND COM OTH PTY SCC	Teacher MUSD	\$250.00	\$250	00	\$250.00
			SUBTOTAL	\$ 1,050.00			
Schedule	A Summary				*Con	tributor C	odes
1, Amount re	eceived this period – itemized monetary contributions. Il Schedule A subtotals.)		\$ <u></u>	10,000.00			nt Committee
*				962.00		- Other (than PTY or SCC) e.g., business entity)
3, Total mone	eceived this period – unitemized monetary contributions etary contributions received this period.			10,962.00		– Political – Small C	Party ontributor Committee
(Add Line:	s 1 and 2. Enter here and on the Summary Page, Colu	mn A, Line 1.)	IUIAL \$			EDDC	Form 460 (January/05)

Type or print in ink.

SCHEDULE A (CONT.)

nonetary Contributions Received	Amounts may be rounded to whole dollars.	Statement covers period July 1, 2014 fromSept. 30, 2014 through	CALIFORNIA 460 FORM 5 of 18	
AME OF FILER Marsha Grilli for Milpitas City Council 2014	:		I.D. NUMBER 1368387	

	· · · · · · · · · · · · · · · · · · ·							
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)		
8/16/14	Massoud Arefi Anbarani 2260 Farmcrest St. Milpitas, CA 95035	IND □COM □OTH □PTY □SCC	Pharmacist Rite Aid	\$150.00	\$150.00	\$150.00		
8/16/14	Barb Martens 1712 Big Bend Dr. Milpitas, CA 95035	IND COM OTH PTY	Analyst MUSD	\$250.00	\$250.00	\$250.00		
8/20/14	Michael Mendizabal 2225 Edsel Drive Milpitas, CA 95035	MIND □COM □OTH □PTY □SCC	Retired	\$200.00	\$200.00	\$200.00		
8/20/14	Thomas J. Valore 670 Cardiff Place Milpitas, CA 95035	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Financial Advisor self employed	\$100.00	\$100.00	\$100.00		
8/20/14	Elizabeth A. Won 248 Silvera Street Milpitas, CA 95035	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Paraprofessional MUSD	\$250.00	\$250.00	\$250.00		
SUBTOTAL\$ 950.00								

*Contributor Codes

IND - Individual

NAME OF FILER

COM - Recipient Committee

(other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

Type or print in ink.
Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

from...

July 1, 2014

				Sept.	30, 2014	Page_	6 of 18
NAME OF FILER Marsha Gri	lli for Milpitas City Council 2014	43330				1.D. NU	1
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)
8/19/14	Armando Gomez 1487 Yosemite Drive Milpitas, CA 95035	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Council member City of Milpitas	\$250.00	\$250.0	00	\$250.00
8/19/14	Michael Mc Inerney 820 Kizer Street Milpitas, CA 95035	☑IND □COM □OTH □PTY □SCC	Retired	\$250.00	\$250.0	00	\$250.00
8/22/14	Sharon Smith 45175 Manzanita Ct. Fremont, CA 94539-6696	☑IND □COM □OTH □PTY □SCC	Substitute Teacher MUSD	\$250.00	\$250.0	00	\$250.00
8/22/14	Patricia Smith 45175 Manzanita Ct. Fremont, CA 94539-6696	☑IND □COM □OTH □PTY □SCC	Retired Teacher	\$150.00	\$150.0	00	\$150.00 ·
8/28/14	Joe McCarthy Mc Carthy Ranch 15425 Los Gatos Blvd., Suite 102 Los Gatos, CA 95032	□IND □COM ØOTH □PTY □SCC		\$250.00	\$250.0	00	\$250.00
			SUBTOTAL	1,150.00			42.5

*Contributor Codes
IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

Schedule A (Continuation Sheet)

Type or print in ink. Amounts may be rounded SCHEDULE A (CONT.)

Wonetary Contributions Received		to whole do		from	July 1, 2014			FORM 460		
				through_	Sept.	30, 2014	Page_	7 of <u>18</u>		
NAME OF FILER Marsha Gri	Ili for Milpitas City Council 2014						1.D. NU 13683			
	FULL NAME STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR	ACMIDID ITOD	IF AN INDIVIDUAL, ENTER	AMO	JNT	CUMULATIVE TO	DDATE	PER ELECTION		

كالأخاص كالمستقل الأشار المستك					 	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/28/14	Diana Orlando 914 Forest Ridge Rd. San Jose, CA 95129	☑IND ☐COM ☐OTH ☐PTY ☐SCC	School Teacher MUSD	\$150.00	\$150.00	\$150.00
8/26/14	Linda Arbaugh 2192 Glenview Drive Milpitas, CA 95035-6666	☑IND □COM □OTH □PTY □SCC	Retired	\$100.00	\$100.00	\$100.00
9/2/14	Dana Charles Arbaugh 2192 Glenview Drive Milpitas, CA 95035-6666	☑IND □COM □OTH □PTY □SCC	Retired	\$100.00	\$100.00	\$100.00
9/9/14	Jerry Epps 1378 Mount Shasta Ave Milpitas, CA 95035	☑IND □COM □OTH □PTY □SCC	retired	\$100.00	\$100.00	\$100.00
9/10/14	Norma Rodriguez 3674 Meadowlands Ln. San Jose, CA 95135-1649	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Director MUSD	\$250.00	\$250.00	\$250.00
	:		SUBTOTAL \$	700.00	Company of the Company	

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)
OTH - Other (e.g., business entity)

PTY - Political Party

Type or print in ink.
Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

950.00

SUBTOTAL \$

from

July 1, 2014

**************************************		a 20/4/100		through Sept.	30, 2014	Page_	
NAME OF FILER Marsha G	rilli for Milpitas City Council 2014	INSTALLS	NA TAN ANTHERS			1.D. NUM 13683	i
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
9/10/14	Jerry Strangis 3546 Steval Place San Jose, CA95136	MIND COM OTH PTY Scc	Self-Employed RE Consultant	\$250.00	\$250	.00	\$250.00
9/10/14	Daniel D. Young Insurance Agency 1313 N. Milpitas Blvd., Suite 200 Milpitas, CA 95035	□IND □COM ØOTH □PTY □SCC	Daniel Young Insurance	\$100.00	\$100.	00	\$100.00
9/10/14	Preston Pipelines, Inc 133 Bothelo Ave. Milpitas, CA 95035	□IND □COM ☑OTH □PTY □SCC	Owner Preston Pipelines	\$250.00	\$250.	00	\$250.00
9/10/14	Gary Filizetti 6901 Gibraltar Dr. Milpitas, CA. 95035	☑IND ☐COM ☐OTH ☐PTY ☐SCC	President, Devcon Construction Co.	\$250.00	\$250.	00	\$250.00
9/12/14	Glen Ishiwata 1958 Cape Hilda Place San Jose, CA 95133-1527	ZIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	\$100.00	\$100.	00	\$100.00

*Contributor Codes

IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

Type or print in ink. Amounts may be rounded to whole dollars.

	SCHEDULE A (CONT.)
CALIF FO	ORNIA 460

July 1, 2014 Sept. 30, 2014

Statement covers period

from_

through_

NAME OF FILER I.D, NUMBER Marsha Grilli for Milpitas City Council 2014 1368387

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)			
9/12/14	Dan Orloff Orloff Williams 66 E. Santa Clara Street, Suite 230 San Jose, CA 95113	□IND □COM ØOTH □PTY □SCC	Marketing Consultant	\$250.00	\$250.00	\$250.00			
9/12/14	Jakub Skyba LeftLane Creative 515 Metzgar Street Half Moon Bay, CA 94019	□IND □COM ØOTH □PTY □SCC	Graphic Design	\$250.00	\$250.00	\$250.00			
9/16/14	David N. Hufton 1455 Fontainbleu Ave. Milpitas, CA 95035	☑IND □COM □OTH □PTY □SCC	Retired	\$150.00	\$150.00	\$150.00			
9/16/14	B&A Tim Hyde 1164 Old Bayshore Hwy San Jose, CA 95112	□IND □COM ØOTH □PTY □SCC	B&A Friction Materials Inc.	\$250.00	\$250.00	\$250.00 ·			
9/16/14	Easy Print Design Inc. 3040 Lawrence Expressway Santa Clara, CA 95051	□IND □COM ØOTH □PTY □SCC		\$250.00	\$250.00	\$250.00			
	SUBTOTAL\$ 1,150.00								

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

NAME OF FILER

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

State from	ment covers period July 1, 2014	CALIFORNIA 460
through_	Sept. 30, 2014	Page_/O_ of_/8_
 1	A CONTRACTOR OF THE PROPERTY O	I.D. NUMBER 1368387

Marsha Grill for Milpitas City Council 2014 PER ELECTION AMOUNT CUMULATIVE TO DATE IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR DATE OCCUPATION AND EMPLOYER RECEIVED THIS TO DATE CALENDAR YEAR (IF COMMITTEE, ALSO ENTER LD. NUMBER) CODE * RECEIVED (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) GEOFIRM William Schreeder \$250.00 ПСОМ PO Box 362160 14189 Saratoga Ave. 9/10/14 \$250.00 \$250.00 **☑**OTH Saratoga, CA 95070 Milpitas, CA 95036 PTY □scc Crescent Montessori School \$250.00 1651 N. Milpitas Blvd. ПСОМ 9/16/14 \$250.00 \$250.00 ОТН Milpitas, CA 95035 □ PTY Scc Lisa Baker Teacher IND \$100.00 891 Hamilton Ave. COM East Side Union HSD \$100.00 9/18/14 \$100.00 Потн Milpitas, CA 95035 PTY Scc Nawal Stanolevic Operations Director **IND** \$100.00 Silicon Valley Montessori 641 Clauser Drive COM \$100.00 \$100.00 9/19/14 Milpitas, CA 95035 ☐OTH PTY Scc Thomas J. Valore Financial Advisor VIND \$150.00 670 Cardiff Pl ПСОМ self employed \$150.00 9/20/14 \$50.00 Milpitas, CA 95035-3442 □OTH □ PTY □scc 750.00

SUBTOTAL \$

*Contributor Codes IND - Individual COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity) PTY - Political Party

Schedule A (Continuation Sheet)

Type or print in ink.

SCHEDULE A	(CONT.)

Monetary Contributions Received	Amounts may be rounded to whole dollars.	State from	Statement covers period July 1, 2014 from		california 460		
		through_	Sept. 30, 2014	Page	11 of 18		
NAME OF FILER Marsha Grilli for Milpitas City Council 2014				1.D. NUME 136838			
		11161			DED ELECTION		

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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RÉCEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC, 31)	PER ELECTION TO DATE (IF REQUIRED)
9/20/14	Patrick V. Grilli 440 Dixon Landing Road, F-201 Milpitas, CA 9505	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Attorney Fenwick and West	\$250.00	\$250.00	\$250.00
9/20/14	Ronald Lind 1874 Yosemite Drive Milpitas, CA 95035	☑IND □COM □OTH □PTY □SCC	Union Officer UFCW Local 5 San Jose, CA	\$250.00	\$250.00	\$250.00
9/20/14	Milpitas Police Officers Association P.A.C. #128-7053 1806 Blue Spruce Ct. Milpitas, CA 95035	□IND COM □OTH □PTY □SCC		\$250.00	\$250.00	\$250.00
9/20/14	Diana M. Orlando 914 Forest Ridge Dr. San Jose, CA 95129	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Teacher MUSD	\$50.00	\$200.00	\$200.00 ·
9/20/14	Law Offices of Thomas M. Bruen F.E.I.N. 68-0240772 1990 N. California Blvd. Ste 620 Walnut Creek, CA 94596-3744	☑IND □COM □OTH □PTY □SCC	Attorney Thomas Bruen	\$250.00	\$250.00	\$250.00
			SUBTOTAL \$	1,050.00		

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity) PTY – Political Party

Type or print in ink.
Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Monetary Contributions Received	to whole dollars.	July 1, 2014	FORM 460		
		Sept. 30, 2014	Page 12 of 18		
AME OF FILER Marsha Grilli for Milpitas City Council 2014			I.D. NUMBER 1368387		
		AMOUNT	DED ELECTION		

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/20/14	Republic Services, Inc. c/o Allied Waste Services 18500 N. Allied Way Phoenix, AZ 85054	□IND □COM ØOTH □PTY □SCC		\$250.00	\$250.00	\$250.00
9/20/14	Milpitas Employee Association ID: 1291980 1265 N. Milpitas Bívd. Milpitas, CA 95035	□IND ☑ COM □ OTH □ PTY □ SCC		\$250.00	\$250.00	\$250.00
9/25/14	Milpitas Fire Fighters IAFF Local 1699 PAC 941250 P.O. Box 361628 Milpitas, CA 95035	☐IND ☑COM ☐OTH ☐PTY ☐SCC	1313 N. Hilpitas Blod Juite 1651 Hilpitas CA5035	\$250.00	\$250.00	\$250.00
9/26/14	Adonai Enterprises, Inc. DBA Mathews Mechanical 33480 Western Ave. Union City, CA 94587	□IND □COM ☑OTH □PTY □SCC		\$250.00	\$250.00	\$250.00
9/26/14	Leadpoint Business Services 5450 E High St. Phoenix, AZ 85054	□IND □COM ☑OTH □PTY □SCC		\$250.00	\$250.00	\$250.00
			SUBTOTAL\$	1,250.00		

*Contributor Codes

IND-Individual

COM -- Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

July 1, 2014

NAME OF FILER Marsha Gi	rilli for Milpitas City Council 2014			Sept.	30, 2014	Page _ I.D. NU 13683	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTERNAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
9/26/14	Censat Enterprises Inc. DBA Centerville Saw Tool 3516 Peralta Blvd Fremont, CA 94536-3738	□IND □COM ☑OTH □PTY □SCC		\$250.00	\$250.	00	\$250.00
9/27/14	League of Conservation Voters 350 Frank H. Ogawa Place Suite 1100 Oakland, CA 94612 FPPC # 951348	□IND ☑COM □OTH □PTY □SCC		\$250.00	\$250.	00	\$250.00
9/29/14	United Food and Commercial Workers Local 5 PAC FPPC ID# 1294035 240 S. Market Street San Jose, CA 95113-2310	□IND COM □OTH □PTY □SCC		\$250.00	\$250.	00	\$250.00
9/30/14	California Apartment Association PAC ID# 745208 980 Ninth Street Ste. 1430 Sacramento, CA 95814	□IND □COM □OTH □PTY □SCC		\$250.00	\$250.	00	\$250.00
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
			SUBTOTAL S	1,000.00			

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

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Schedule B - Part	art
Loans Received	ď

Type or print in ink. Amounts may be rounded to whole dollars.

Statement covers period **CALIFORNIA** July 1, 2014 **FORM** from Sept. 30, 2014 through _

SEE INSTRUCTIONS ON REVERSE I.D. NUMBER NAME OF FILER 1368387 Marsha Grilli for Milpitas City Council 2014 (g) (a) OUTSTANDING (c) (d) OUTSTANDING IF AN INDIVIDUAL, ENTER **CUMULATIVE AMOÚNT** INTEREST **ORIGINAL** FULL NAME, STREET ADDRESS AND ZIP CODE AMOUNT PAID OCCUPATION AND EMPLOYER BALANCE AT BALANCE RECEIVED THIS PAID THIS AMOUNT OF CONTRIBUTIONS OF LENDER OR FORGIVEN CLOSE OF THIS (IF SELF-EMPLOYED, ENTER BEGINNING THIS TO DATE PERIOD (IF COMMITTEE, ALSO ENTER LD. NUMBER) PERIOD LOAN THIS PERIOD NAME OF BUSINESS) PERIOD PERIOD CALENDARYEAR Marsha Grilli Childcare provider/pre-PAID 12,500 0 12,500 0 12.500 school RATE PER ELECTION** FORGIVEN 12,500 8/4/14 n/a DATE INCURRED DATE DUE COM COTH PTY SCC ☐ PAID **CALENDAR YEAR** RATE PER ELECTION ** FORGIVEN DATE DUE DATE INCURRED ☐ COM ☐ OTH ☐ PTY ☐ SCC TI IND CALENDAR YEAR PAID RATE PER ELECTION** FORGIVEN DATE DUE DATE INCURRED [†]☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC 12,500 s 12,500 SUBTOTALS \$ (Enter (e) on Schedule E, Line 3) Schedule B Summary 12,500.00 1. Loans received this period †Contributor Codes (Total Column (b) plus unitemized loans of less than \$100.) IND - Individual 0 2. Loans paid or forgiven this period\$ -COM - Recipient Committee (other than PTY or SCC) (Total Column (c) plus loans under \$100 paid or forgiven.) OTH - Other (e.g., business entity) (Include loans paid by a third party that are also itemized on Schedule A.) PTY - Political Party SCC - Small Contributor Committee

*Amounts forgiven or paid by another party also must be reported on Schedule A. ** If required.

Enter the net here and on the Summary Page, Column A, Line 2.

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule E **Payments Made**

Type or print in ink. Amounts may be rounded

Statement covers period July 1, 2014	CALIFORNIA 460
Sept. 30, 2014	Page 15 of 18
	I.D. NUMBER 1368387

to whole dollars. SEE INSTRUCTIONS ON REVERSE NAME OF FILER Marsha Grilli for Milpitas City Council 2014

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs campaign paraphernalia/misc. MBR member communications RFD returned contributions MTG meetings and appearances campaign consultants contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CTB t.v. or cable airtime and production costs PET petition circulating civic donations candidate travel, lodging, and meals phone banks candidate filing/ballot fees staff/spouse travel, lodging, and meals polling and survey research POL fundraising events independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor VOT voter registration professional services (legal, accounting) legal defense WEB information technology costs (internet, e-mail) campaign literature and mailings PRT print ads NAME AND ADDRESS OF PAYEE DESCRIPTION OF PAYMENT AMOUNT PAID CODE OR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) **COPS Voter Guide** 705-2 Bidwell Street #370 \$542.00 LIT

City of Milpitas 455 E. Calaveras Blvd. Milpitas, CA 95035-5411	FIL	\$1,900.00
Pacific Printing 1002 South 2nd Street San Jose, CA 95112	LIT	\$244.69

Schedule E Summary 14.074.67 1. Itemized payments made this period. (Include all Schedule E subtotals.).....\$ 2. Unitemized payments made this period of under \$100\$

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)......\$_ 14,277.95

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

2.686.69

Type or print in ink.

Amounts may be rounded to whole dollars.

SCH. JLEE (CONT.)

	covers period y 1, 2014	CALIFORNIA FORM	460
Se through	ot. 30, 2014	Page 100	of <u>18</u>
		LD. NUMBER 1368387	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Marsha Grilli for Milpitas City Council 2014

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc. member communications RAD radio airtime and production costs campaign consultants MTG meetings and appearances returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations petition circulating t.v. or cable airtime and production costs candidate filing/ballot fees phone banks candidate travel, lodging, and meals fundraising events polling and survey research staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor

LEG legal defense PRO professional services (legal, accounting) VOT voter registration
LIT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Pacific Printing 1002 S. 2nd St. San Jose, CA 95112		LIT		\$261.00
Pacific Printing 1002 S. 2nd St. San Jose, CA 95112		СМР		\$103,31
Pacific Printing 1002 S. 2nd St. San Jose, CA 95112		CMP		\$348.00
Milpitas Post 59 Marylinn Drive Milpitas, CA 95035		PRT		\$3,000.00
Pacific Printing 1002 S. 2nd St. San Jose, CA 95112		LIT	*:	\$3,922.70

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

7,635.01

Schedul £ (Continuation Sheet) Payments Made

SEE INSTRUCTIONS ON REVERSE

Marsha Grilli for Milpitas City Council 2014

NAME OF FILER

Type or print in ink.
Amounts may be rounded to whole dollars.

Statement covers period
July 1, 2014
from Sept. 30, 2014

through

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SC. JULE E (COT.)

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I.D. NUMBER 1368387

	nmunications d appearance ses lating s survey resea ivery and m	RAD radio airtime and production costs es RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals	•
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT A	MOUNT PAID
Pacific Printing 1002 S. 2nd St. San Jose, CA 95112	LIT		\$27 7 31
Ronald Lind 1874 Yosemite Drive Milpitas, CA 95035	LIT	Re-imbursement for on-line lawn sign order	\$1,52500
CALSAL VOTER GUIDE 1954 W. Carson Street, Suite B Torrance, CA 90501	LIT		\$49800
California Voter Guide 1954 W. Carson Street, Suite B Torrance, CA 90501	LIT		\$322,00
Californians Vote Green c/o Dakota Communications 11845 West Olympic Blvd., Suite 645 Los Angeles, CA 90064	LIT	W.	\$587,00
Payments that are contributions or independent expenditures must also be summarized on s	Schedule D	SUBTOTAL \$	3,209,31

Schedule	ć	
(Continua	tion	Sheet)
Payments	Mad	de

campaign paraphernalia/misc.

Type or print in ink. Amounts may be rounded to whole dollars.

MBR member communications

	SC. ULE E (CONT.)
Statement covers period	CALIFORNIA ACO
July 1, 2014	FORM 40U
Sept. 30, 2014	Page 18 of

SEE INSTRUCTIONS ON REVERSE		Sept. 30, 2014	Page <u>/8</u> of
NAME OF FILER Marsha Grilli for Milpitas City Council 2014			I.D. NUMBER 1368387
CODES: If one of the following codes accurately	describes the payment, you may enter the code. MBR member communications	Otherwise, describe the payment. RAD radio airtime and production	

MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and POS postage, dei	d appearance nses llating s survey resear livery and me	SAL campaign workers' salaries TEL t.v. or cable airtime and production TRC candidate travel, lodging, and me staff/spouse travel, lodging, and transfer between committees of voter registration	on costs eals meals the same candidate/sponsor
	CODE (DR DESCRIPTION OF PAYMENT	AMOUNT PAID
	PRT		\$250.00
	LIT	Re-imbursement for on-line order	\$293.66
			•
	MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and s POS postage, del PRO professional	OFC office expenses PET petition circulating PHO phone banks POL polling and survey researe POS postage, delivery and met PRO professional services (leg PRT print ads CODE CO	MTG meetings and appearances OFC office expenses SAL campaign workers' salaries office expenses SAL t.v. or cable airtime and producting TEL t.v. or cable airtime and producting phone banks TRC candidate travel, lodging, and postage, delivery and messenger services professional services (legal, accounting) print ads CODE OR DESCRIPTION OF PAYMENT Re-imbursement for on-line order Re-imbursement for on-line order

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period July 1, 2014 from	california 460				
Sept. 30, 2014	12 18 Page of				
· · · · · · · · · · · · · · · · · · ·	I.D. NUMBER 1368387				

Marsha Grilli for Milpitas City Council 2014 PER ELECTION AMOUNT **CUMULATIVE TO DATE** IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR DATE TO DATE RECEIVED THIS OCCUPATION AND EMPLOYER CALENDAR YEAR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE * RECEIVED (IF REQUIRED) PERIOD (IF SELF-EMPLOYED, ENTER NAME (JAN, 1 - DEC, 31) OF BUSINESS) Republic Services, Inc. **□IND** \$250.00 c/o Allied Waste Services COM \$250.00 9/20/14 \$250.00 MTO M 18500 N. Allied Way **□** PTY Phoenix, AZ 85054 □scc Milpitas Employees Association □IND \$250.00 1265 N. Milpitas Blvd. COM \$250.00 \$250.00 9/20/14 Milpitas, CA 95035 ✓ OTH □ PTY □scc Milpitas Fire Fighters IAFF Local 1699 1313 N. Milpitas Blvd. \$250.00 Suite 165 L PAC 941250 COM \$250.00 \$250.00 9/25/14 □ OTH Milpitas, CA 95035 PO Box 361628 □ PTY Milpitas, CA 95035 SCC Adonai Enterprises, Inc. MIND \$250.00 **DBA Mathews Mechanical** ПСОМ \$250.00 9/26/14 \$250.00 **✓** OTH 33480 Western Ave. □ PTY Union City, CA 94587 □scc Leadpoint Business Services \$250.00 5450 E High St. COM \$250.00 \$250.00 9/26/14 Phoenix, AZ 85054 OTH □ PTY SCC 1,250.00 **SUBTOTAL \$**

*Contributor Codes

IND - Individual

NAME OF FILER

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party